

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE * BKRTCY. NO. 14-09549 MCF
NASHALIE IVETTE RODRIGUEZ GARCIA * CHAPTER 7
DEBTOR *

**DEBTOR'S NOTICE OF FILING OF AMENDED SCHEDULES "I" & "J"
OFFICIAL FORMS 106I & 106J**

TO THE HONORABLE COURT:

COMES NOW, NASHALIE IVETTE RODRIGUEZ GARCIA, the debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

1. The debtor is hereby submitting ***Amended Schedules "I" & "J"***, dated June 06, 2016, herewith and attached to this motion.
2. The amendment to Schedules "I" and "J" is filed to disclose debtor's current household income and expenses.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

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Notice of Amended Schedule "I " & "J"
Case no. 14-09549 MCF7

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 7 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtor and to all creditors and interested parties appearing in the master address list, hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 08th day of June, 2016.

/s/Roberto Figueroa Carrasquillo
USDC #203614
RFIGUEROA CARRASQUILLO LAW OFFICE PSC
ATTORNEY FOR PETITIONER
PO BOX 186 CAGUAS PR 00726
TEL NO 787-744-7699 FAX 787-746-5294
Email: rfigueroa@rfclawpr.com

Fill in this information to identify your case:	
Debtor 1	<u>NASHALIE IVETTE RODRIGUEZ GARCIA</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO</u>
Case number (if known)	<u>3:14-bk-9549</u>

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

12/15

Official Form 106I

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

Debtor 1

Debtor 2 or non-filing spouse

Employed

Employed

Not employed

Not employed

Occupation

Consultant For Fine Jewelry

Assistant Manager

Include part-time, seasonal, or self-employed work.

Employer's name

Sears

Wendco Of Puerto Rico

Occupation may include student or homemaker, if it applies.

Employer's address

PO Box 6189
Sioux Falls, SD 57117-6189

PO Box 366308
San Juan, PR 00936-6308

How long employed there?

2 years

10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

<p>For Debtor 1</p>	<p>For Debtor 2 or non-filing spouse</p>
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2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ <u>1,203.97</u>	\$ <u>2,146.47</u>
3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. \$ <u>1,203.97</u>	\$ <u>2,146.47</u>

Debtor 1 RODRIGUEZ GARCIA, NASHALIE IVETTE

Case number (if known) 3:14-bk-9549

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>	
Copy line 4 here	<u>4. \$ 1,203.97</u>	<u>\$ 2,146.47</u>	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>227.80</u>	
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>0.00</u>	
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>0.00</u>	
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>0.00</u>	
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>0.00</u>	
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>0.00</u>	
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>0.00</u>	
5h. Other deductions. Specify: <u>Fed MED/EE</u>	5h. \$ <u>12.89</u>	\$ <u>0.00</u>	
<u>Fed OASDI/EE</u>	\$ <u>55.12</u>	\$ <u>0.00</u>	
<u>PR Withholding</u>	\$ <u>31.07</u>	\$ <u>0.00</u>	
<u>Taxes</u>	\$ <u>31.11</u>	\$ <u>0.00</u>	
<u>Plan Medico</u>	\$ <u>0.00</u>	\$ <u>60.36</u>	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	<u>6. \$ 130.19</u>	<u>\$ 288.16</u>	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	<u>7. \$ 1,073.78</u>	<u>\$ 1,858.31</u>	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm	8a. \$ <u>0.00</u>	\$ <u>0.00</u>	
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>0.00</u>	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. \$ <u>0.00</u>	\$ <u>0.00</u>	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>0.00</u>	
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>0.00</u>	
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify:	8f. \$ <u>0.00</u>	\$ <u>0.00</u>	
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>0.00</u>	
8h. Other monthly income. Specify: <u>Christmas Bonus \$600.00/12</u>	8h. \$ <u>50.00</u>	\$ <u>0.00</u>	
<u>Christmas Bonus \$600.00/12</u>	\$ <u>0.00</u>	\$ <u>50.00</u>	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	<u>9. \$ 50.00</u>	<u>\$ 50.00</u>	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	<u>10. \$ 1,123.78</u>	<u>+ \$ 1,908.31</u>	<u>= \$ 3,032.09</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			11. +\$ <u>0.00</u>
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies			12. \$ <u>3,032.09</u>
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			
Combined monthly income			

Fill in this information to identify your case:

Debtor 1	<u>NASHALIE IVETTE RODRIGUEZ GARCIA</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO</u>
Case number (if known)	<u>3:14-bk-9549</u>

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents names.		Daughter	1 year	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses	
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4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 350.00

If not included in line 4:

4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<u>0.00</u>
4b. \$	<u>0.00</u>
4c. \$	<u>0.00</u>
4d. \$	<u>0.00</u>
5. \$	<u>0.00</u>

Debtor 1 RODRIGUEZ GARCIA, NASHALIE IVETTE

Case number (if known) 3:14-bk-9549

6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>75.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>50.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>0.00</u>
6d. Other. Specify: <u>Cellular (Debtor)</u> <u>Cellular (Consensual Debtor)</u>	6d. \$ <u>83.00</u> \$ <u>83.00</u>
7. Food and housekeeping supplies	7. \$ <u>441.64</u>
8. Childcare and children's education costs	8. \$ <u>325.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>60.00</u>
10. Personal care products and services	10. \$ <u>50.00</u>
11. Medical and dental expenses	11. \$ <u>75.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>217.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>45.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>0.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
21. Other: Specify: <u>Car Annual Registration Fees \$209.50/12</u> <u>Lunch At Work (Debtor)</u> <u>Lunch At Work (Consensual Spouse)</u> <u>Gasoline (Consensual Spouse)</u> <u>Gas \$30.00X4=120.00/12</u> <u>Beauty (Debtor)</u> <u>Barber (Consensual Spouse)</u> <u>DSO child support consensual spouse</u> <u>Savings/Emergency Funds</u>	21. +\$ <u>17.46</u> +\$ <u>250.00</u> +\$ <u>100.00</u> +\$ <u>240.00</u> +\$ <u>10.00</u> +\$ <u>40.00</u> +\$ <u>40.00</u> +\$ <u>440.00</u> +\$ <u>40.00</u>
22. Calculate your monthly expenses 22a. Add lines 4 through 21.	\$ <u>3,032.10</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>3,032.10</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	
23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>3,032.09</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>3,032.10</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>-0.01</u>

Debtor 1 RODRIGUEZ GARCIA, NASHALIE IVETTE

Case number (if known)

3:14-bk-9549

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:				
Debtor 1	NASHALIE IVETTE RODRIGUEZ GARCIA			
	First Name	Middle Name		
Debtor 2 (Spouse if, filing)	Last Name	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO				
Case number (if known)	3:14-bk-9549			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.


NASHALIE IVETTE RODRIGUEZ GARCIA
Signature of Debtor 1

Date June 6, 2016

x

Signature of Debtor 2

Date

Label Matrix for local noticing

0104-3

Case 14-09549-MCF7

District of Puerto Rico

Old San Juan

Wed Jun 8 10:27:20 AST 2016

US Bankruptcy Court District of P.R.

Jose V Toledo Fed Bldg & US Courthouse

300 Recinto Sur Street, Room 109

San Juan, PR 00901-1964

COOP A/C DEL VALENCIANO

PO BOX 1510

JUNCOS, PR 00777-1510

UNITED STATES TRUSTEE

500 TANCA ST STE 301

SAN JUAN, PR 00901-1922

Anastacio Velazquez

Cerro Gordo Ward R183 Ramal 916 Km 4.6

San Lorenzo, PR 00754

Claro

PO Box 360998

San Juan, PR 00936-0998

Comenity Bank/Pacsnnwr

995 W 122nd Ave

Westminster, CO 80234-3417

Dept Of Transportacion Y Obras Publicas

PO Box 41269

San Juan, PR 00940-1269

Gura Coop

PO Box 678

Gurabo, PR 00778-0678

Island Finance

PO Box 71504

San Juan, PR 00936-8604

Municipio Autonomo De Caguas

PO Box 907

Caguas, PR 00726-0907

NCO Financial Systems Of PR

Metro Office Park 18 Calle 1, Suite 5000
Guaynabo, PR 00968-1769

Quantum3 Group LLC as agent for

Comenity Bank

PO Box 788

Kirkland, WA 98083-0788

SANTANDER FINANCIAL D/B/A ISLAND FINANCE

PO BOX 195369

SAN JUAN PR 00919-5369

Sprint

PO Box 7993

Atlanta, GA 30357-0993

MONSITA LECAROZ ARIBAS

OFFICE OF THE US TRUSTEE (UST)

OCHOA BUILDING

500 TANCA STREET SUITE 301

SAN JUAN, PR 00901

NASHALIE IVETTE RODRIGUEZ GARCIA

PO BOX 434

GURABO, PR 00778-0434

ROBERTO FIGUEROA CARRASQUILLO

PO BOX 186

CAGUAS, PR 00726-0186

ROBERTO ROMAN VALENTIN

US TRUSTEES OFFICE

PO BOX 9024003

SAN JUAN, PR 00902-4003

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d) Coop A/C Del Valenciano

PO Box 1510

Juncos, PR 00777-1510

End of Label Matrix

Mailable recipients 18

Bypassed recipients 1

Total 19